Page 1 of 2 Pages Original Substitute Supplement:	Page	ł	of	2	Pages	1	1	Original	1		Substitute	1	1	Supplementa
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Combined Declaration for Patent Application and Power of Attorney

As a below-named inventor, I hereby declare that:

Α

priority is claimed:

My residence, post office address and citizenship are as stated below next to my name, and that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

BILLIARDS CUE	TP
the specification of v	
	is attached hereto; was filed in the United States under 35 U.S.C. §111 on
and was amended on	(if applicable).
amendment referred	understand the contents of the above-identified specification, including the claims, as amended by any to above, and I acknowledge the duty to disclose to the Patent and Trademark Office (PTO) all by me to be material to patentability as defined in 37 C.F.R. §1.56.
inventor's certificate	ign priority benefits under 35 U.S.C. §§ 119 and 365 of any prior foreign application(s) for patent or or prior PCT application(s) designating a country other than the U.S., listed below with the "Yes" box identified below any such application having a filing date before that of the application on which

(Number)	(Country)	(Day Month Year Filed)	YES	NO
(Number)	(Country)	(Day Month Year Filed)	YES	NO

I hereby claim the benefit under 35 U.S.C. §120 of any prior U.S. non-provisional application(s) or prior PCT application(s) designating the U.S. listed below, or under §119(e) of any prior U.S. provisional applications listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in such U.S. or PCT application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the PTO all information as defined in 37 C.F.R. §1 56(a) which occurred between the filing date of the prior application and the national filing date of this application:

(Application No.)	(Day Month Year Filed)	(Status) paterited, pending, abandoned)
(Application No.)	(Day Month Year Filed)	(Status: patented, pending, abandoned)
(Application No.)	(Day Month Year Filed)	(Status patented, pending, abandoned)

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

All of the practitioners associated with Customer Number 001444

Direct all correspondence to the address associated with Customer Number 001444; i.e.,

BROWDY AND NEIMARK, P.I..L.C. 624 Ninth Street, N.W. Washington, D.C. 20001-5303 (202) 628-5197

The undersigned hereby authorizes the U.S. Attorneys or Agents appointed herein to accept and follow instructions from DINITION BIT'L. P. & TM OFFICE as to any action to be taken in the U.S. Patent and Trademark Other regarding this application without direct communication between the U.S. Attorneys or Agents and the undersigned. In the event of a change of the persons from whom instructions may be taken, the U.S. Attorneys or Agents appointed herein will be so notified by the

Page 2 of 2 Pages A BILLHARD CUE TIP			Atty. Docket:
U.S. Application filed	. Serial No.		· · · · · · · · · · · · · · · · · · ·
U.S. Application filed PCT Application filed	, Serial No.		
I hereby further declare that all statements mad information and belief are believed to be true; a statements and the like so made are punishable by false statements may jeopardize the validity of the	de herein of my own knowledge a and that these statements were ma y fine or imprisonment, or both, un-	re true and that de with the know der 18 U.S.C. §10	sledge that willful fals
FULL NAME OF FIRST INVENTOR CHANG, Jung-Shih	INVENTOR'S SIGNATURE	FH'S	DATE Aug. 18, 200
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FULL NAME OF THIRD JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE
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FULL NAME OF SEVENTH PORT INVENTOR	INVENTOR'S STURATURE		DATE
RESIDENT		CUTTENSITE	
POST OFFICE ADDRESS			